

Department of Health

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Description	FY 2003 Actual	FY 2004 Approved	FY 2005 Proposed	% Change from FY 2004
Operating Budget	\$1,381,646,164	\$1,500,159,447	\$1,667,168,819	11.1
FTEs	1,168.0	1,468.0	1,459.0	-

The mission of the Department of Health (DOH) is to provide public health education, health risk identification, prevention and control of diseases, injuries, and exposure to environmental hazards, effective community collaborations, and optimal equitable access to community resources, to residents, visitors and businesses in the District of Columbia so they can be safe, healthy and maintain the highest quality of life.

The dynamics of healthcare budgeting continue to present unique challenges especially given the constraints associated with operating in a fiscally difficult environment. In the FY 2005 budget, DOH strengthens the framework that meets these challenges and maintains a focus on its commitment to the corporate achievement of the Citywide Strategic Priority area goals of Strengthening Children, Youth, Families, and Individuals and Making Government Work. This commitment finds expression in a programmatic structure designed to effectively implement the Mayor's initiatives of moving the District's health care system toward community based prevention and primary care, keeping children and families healthy, reducing unnecessary hospitalization, and ultimately reducing the burden of disease in the District's population.

The agency plans to fulfill its mission by achieving the following strategic result goals:

- Continue to improve the health status of District residents.
 - Decrease the mortality rate of cardiovascular disease per 100,000 residents from 263.2 (1997) to 247.2 by FY 2005 (H.P. 2010 Target = 210.5).
 - Decrease the incident rate of AIDS cases per 100,000 residents from 143 (1997) to 116 by FY 2005 (H.P. 2010 Target = 90).
- Reduce disparities in health status due to ethnicity, income and geographic location.
 - By the end of FY 2006, 85 percent of all residents of DC shall have access to necessary healthcare (H.P. 2010 Target = 100 percent).

- Health policy and strategy decisions will be informed by accurate health information depicting health trends and program outcomes.
 - By the end of FY 2005, DOH will have a policy agenda that establishes bi-annual goals and over-arching objectives
 - By the end of FY 2005, DOH will have an operational policy review committee or other formal process to ensure timely policy development and dissemination.
- Enhanced rapid response capacity that will coordinate with other District agencies and surrounding jurisdictions to respond quickly and effectively to emergencies especially bio-terrorism, natural disasters and health related situations.
 - By the end of 2005, the Department of Health will have a bio-surveillance system and health alert notification system to include all District hospitals, primary care facilities and 50 percent of licensed providers.
 - By the end of FY 2005, the Department of Health's emergency response communication system will link all District hospitals and 50 percent of other healthcare providers.
- Implement an aggressive health assurance program to ensure compliance and regulatory requirements.
 - By the end of FY 2005, ensure that 90 percent of all health care and childcare facilities in the District are in substantial compliance with regulatory standards.
 - By the end of FY 2005, increase by 10 percent the overall percentage of food establishments with a re-inspection score of 85 percent or better.
- Maximize the amount of private, federal and other resources available for programs and support services to residents of the District of Columbia.
 - Beginning in FY 2005, sustain an annual increase of 5 percent over the previous fiscal year in the amount of funds from other than local appropriations.
- Finance, design, and implement a cost effective health care delivery system that enhances District residents' access to quality health care. Audit 15 percent of highest paid providers by categories of providers for fraud and abuse.
 - Increase fee-for-service health check participation rate by 10 percent.

Gross Funds

The proposed budget is \$1,667,168,819, representing an increase of 11.1 percent over the FY 2004 approved budget of \$1,500,159,447. There are 1,459.0 FTEs for the agency, a decrease of 9.0 over the FY 2004 approved budget.

General Funds

Local Funds. The proposed budget is \$515,841,694, an increase of \$57,195,511 or 12.5 percent from the FY 2004 approved budget. The Local funds budget supports 392.0 FTEs, a decrease of 51.0 from the FY 2004 approved budget.

Special Purpose Revenue Funds. The proposed budget is \$17,890,648, an increase of \$357,941 or 2.0 percent over the FY 2004 approved budget. The Special Purpose Revenue funds budget supports 129.0 FTEs, an increase of 18.0 over the FY 2004 approved budget.

Federal Grant Funds

The proposed budget is \$145,110,976, an increase of \$6,675,985 or 4.8 percent over the FY 2004 approved budget. The Federal Grant funds budget supports 846.0 FTEs, an increase of 28.0 over the FY 2004 approved budget.

Federal Medicaid Payments

The proposed budget is \$980,607,366, an increase of \$100,992,149 or 11.5 percent over the FY 2004 approved budget. The Federal Medicaid Program funds budget supports 81.0 FTEs, a increase of 1.0 over the FY 2004 approved budget.

Funding by Source

Tables HC0-1 and 2 show the sources of funding and FTEs by fund type for the Department of Health.

Table HC0-1

FY 2005 Proposed Operating Budget, by Revenue Type

(dollars in thousands)

Appropriated Fund	Actual FY 2002	Actual FY 2003	Approved FY 2004	Proposed FY 2005	Change from FY 2004	Percent Change
Local Fund	422,735	479,853	458,646	515,842	57,196	12.5
Special Purpose Revenue Fund	9,389	13,696	17,533	17,891	358	2.0
Total for General Fund	432,124	493,549	476,179	533,732	57,553	12.1
Federal Payments	1,621	31,362	0	0	0	0.0
Federal Grant	780,370	142,804	138,435	145,111	6,676	4.8
Federal Medicaid Payments	0	703,619	879,615	980,607	100,992	11.5
Total for Federal Resources	781,990	877,784	1,018,050	1,125,718	107,668	10.6
Private Grant Fund	1,346	2,106	434	150	-284	-65.5
Total for Private Funds	1,346	2,106	434	150	-284	-65.5
Intra-District Fund	10,257	8,207	5,496	7,568	2,072	37.7
Total for Intra-District Funds	10,257	8,207	5,496	7,568	2,072	37.7
Gross Funds	1,225,718	1,381,646	1,500,159	1,667,169	167,009	11.1

Table HC0-2

FY 2005 Full-Time Equivalent Employment Levels

Appropriated Fund	Actual FY 2002	Actual FY 2003	Approved FY 2004	Proposed FY 2005	Change from FY 2004	Percent Change
General Fund						
Local Fund	485	436	443	392	-51	-11.5
Special Purpose Revenue Fund	52	69	111	129	18	16.5
Total for General Fund	537	505	554	522	-33	-5.9
Federal Resources						
Federal Grant	591	648	818	846	28	3.4
Federal Medicaid Payments	0	0	80	81	1	0.6
Total for Federal Resources	591	648	898	926	29	3.2
Private Funds						
Private Grant Fund	1	4	8	4	-4	-50.0
Total for Private Funds	1	4	8	4	-4	-50.0
Intra-District Funds						
Intra-District Fund	4	11	8	7	-1	-12.5
Total for Intra-District Funds	4	11	8	7	-1	-12.5
Total Proposed FTEs	1,134	1,168	1,468	1,459	-9	-0.6

Expenditures by Comptroller Source Group

Table HC0-3 shows the FY 2005 proposed budget for the agency at the Comptroller Source Group level (Object Class level).

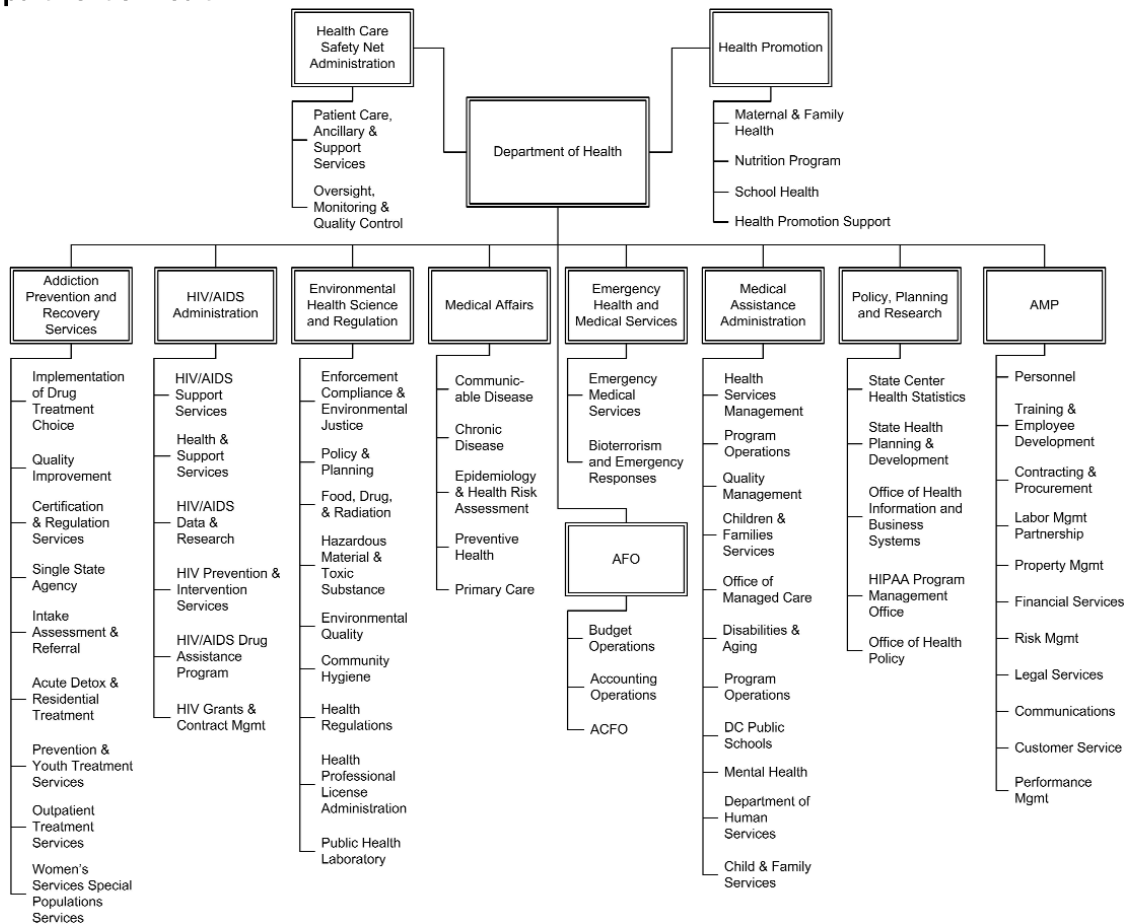
Table HC0-3

FY 2005 Proposed Operating Budget, by Comptroller Source Group

(dollars in thousands)

Comptroller Source Group	Actual FY 2002	Actual FY 2003	Approved FY 2004	Proposed FY 2005	Change from FY 2004	Percent Change
11 Regular Pay - Cont Full Time	42,745	56,025	38,483	36,625	-1,858	-4.8
12 Regular Pay - Other	9,644	5,802	30,857	35,619	4,761	15.4
13 Additional Gross Pay	547	553	588	663	75	12.7
14 Fringe Benefits - Curr Personnel	9,247	10,756	12,106	12,992	886	7.3
15 Overtime Pay	744	759	430	147	-283	-65.8
Subtotal Personal Services (PS)	62,928	73,896	82,465	86,046	3,581	4.3
20 Supplies And Materials	3,572	3,563	2,702	2,816	114	4.2
30 Energy, Comm. And Bldg Rentals	376	3,122	366	485	120	32.7
31 Telephone, Telegraph, Telegram, Etc	1,439	1,868	1,386	2,510	1,124	81.1
32 Rentals - Land And Structures	11,925	11,637	12,957	13,432	475	3.7
33 Janitorial Services	29	45	24	28	4	17.8
34 Security Services	1,934	2,302	2,291	2,782	491	21.4
35 Occupancy Fixed Costs	0	0	0	0	0	0.0
40 Other Services And Charges	15,096	22,030	11,704	8,557	-3,147	-26.9
41 Contractual Services - Other	198,936	236,457	194,901	227,125	32,225	16.5
50 Subsidies And Transfers	926,391	1,020,705	1,187,540	1,320,044	132,504	11.2
70 Equipment & Equipment Rental	2,735	6,021	3,447	3,343	-104	-3.0
80 Debt Service	0	0	377	0	-377	-100.0
Subtotal Nonpersonal Services (NPS)	1,162,790	1,307,750	1,417,695	1,581,123	163,428	11.5
Total Proposed Operating Budget	1,225,718	1,381,646	1,500,159	1,667,169	167,009	11.1

Figure HC0-1
Department of Health



Private Funds

The proposed budget is \$150,000, a decrease of \$284,336 or 65.5 percent from the FY 2004 approved budget. The private funds budget supports from 4.0 FTEs, a decrease of 4 from the FY 2004 approved budget.

Intra-District Funds

The proposed Intra-District budget is \$7,568,135, an increase of \$2,072,122 over the FY 2004 approved budget. There are 7.0 FTEs supported by this funding source, a decrease of 1.0 from the FY 2004 approved budget.

Programs

The Department of Health is committed to the following programs:

Addiction Prevention and Recovery

	FY 2004	FY 2005
Budget	\$33,345,515	\$32,808,799
FTEs	188.0	188.0

Program Description

The **Addiction Prevention and Recovery Administration (APRA)** program primarily supports the Citywide Strategic Priority Area of Making Government Work as it functions to provide the highest quality regulatory standards for the delivery of prevention and treatment services to the citizens of the District of Columbia

who are addicted or who are at risk of becoming addicted to alcohol, tobacco and other drugs. APRA's prevention and treatment regulatory services are provided through the following activities:

- **Drug Treatment Choice** - provides increased access to substance abuse treatment to residents of the District of Columbia so they can receive appropriate services from the provider of their choice.
- **Quality Improvement** - provides a structure for the management of the Quality Improvement process to APRA staff and clients receiving APRA services so they can identify areas where services can be improved.
- **Certification and Regulations** - provides certification standards and certification under those standards to providers of substances abuse and addiction services so they can provide a level of care that meets the substance abuse regulations.
- **Single State Agency** - provides citizens of the District with access to the highest standard of addiction services at a reasonable cost, so they can reduce the debilitating effects of substance abuse.
- **Intake, Assessment and Referral** - provides assessment and referral services to District residents seeking or remanded to substance abuse treatment so they can obtain an assessment and be referred to an appropriate level of care in a timely manner.
- **Acute Detoxification and Residential Treatment Services** - provides acute detoxification and residential treatment services to District residents who are abusing substances or are addicted to substances so they can access those services in a timely manner and ensure those services are effective.
- **Prevention and Youth Treatment Services** - provides substance abuse prevention and treatment services for children, youth and their families so they can delay the onset of alcohol and tobacco use and youth receive the needed substance abuse treatment

- **Outpatient Treatment Services (including Methadone Maintenance)** - The purpose of the Outpatient treatment activity is to provide outpatient treatment services to those District of Columbia residents who are addicted to or abusing drugs, so they can receive appropriate outpatient treatment services.
- **Women's Services** - provides outpatient substance abuse treatment, services to women, women with children and pregnant women so they can receive treatment services that meet the needs of women and their families.
- **Special Population Services** - provides substance abuse prevention, outreach and treatment services to special populations so they can access treatment services specific to their special needs.

Program Budget Summary

This program has a gross funds budget decrease of \$536,716, or 1.6 percent from the FY 2004 approved budget of \$33,345,515. This includes a Local funds increase of \$58,518 for salary increases; a Federal Grant funds decrease of \$3,168,554, a Special Purpose Revenue funds increase of \$174,600, and an Intra-District funds increase of \$2,398,720. This change is due primarily to decreases in Federal Grants funding and two new Intra-District agreements, one with the Child and Family Services Agency (\$1,400,000) and one with the Department of Human Services (\$998,720); both are for substance abuse services. The gross budget supports 188.0 FTEs, no change from the FY 2004 approved budget.

Key Result Measures

Program 1: Addiction Prevention and Recovery Administration

Citywide Strategic Priority Area(s): Strengthening Children, Youth, Families, and Elders

Citywide Strategic Priority Area(s): Strengthening Children, Youth, Families and Elders

Manager(s): Robert Johnson, Senior Deputy Director

Supervisor(s): Vacant

Measure 1.1: Percent of patients that will receive a treatment plan

	Fiscal Year		
	2004	2005	2006
Target	100	100	100
Actual	-	-	-

Measure 1.2: Percent of patients admitted to outpatient treatment that meet their treatment plan objectives

	Fiscal Year		
	2004	2005	2006
Target	40	40	40
Actual	-	-	-

Measure 1.3: Percent of DC residents that will receive prevention information

	Fiscal Year		
	2004	2005	2006
Target	30	30	30
Actual	-	-	-

Measure 1.4: Percent of addicted youth population that will receive treatment services

	Fiscal Year		
	2004	2005	2006
Target	10	12	12
Actual	-	-	-

Measure 1.5: Percent of clients that will receive an initial assessment within the same day of presentation

	Fiscal Year		
	2004	2005	2006
Target	80	90	90
Actual	-	-	-

Measure 1.6: Percent of clients assessed that will be referred to treatment

	Fiscal Year		
	2004	2005	2006
Target	80	90	90
Actual	-	-	-

Emergency Health & Medical Services

	FY 2004	FY 2005
Budget	\$11,694,029	\$12,991,416
FTEs	56.0	59.0

Program Description

The Emergency Health and Medical Services program primarily supports the Citywide Strategic Priority area of Strengthening Children, Youth, Families and Elders. It functions to provide assurance for timely and appropriate emergency medical services and information to District residents, healthcare providers, visitors and other stakeholders so they can be prepared for pre-and post emergency event, and receive standard-of-care public health interventions. This program's emergency health services are provided through the following activities:

- **Emergency Medical Services (EMS)** - provides EMS oversight and regulation services to District EMS system providers so they can provide consistent and standardized emergency medical responses.
- **Bioterrorism and Emergency Responses** - provides emergency response services to District residents, visitors and workers in the District so they can receive rapid and appropriate responses to a public health or safety threat.

Program Budget Summary

This program has a gross funds budget increase of \$1,297,387, or 11.1 percent over the FY 2004 approved budget of \$11,694,029. This includes a Local funds increase of \$3,433, a Federal Grant funds increase of \$1,283,954, and a Special Purpose Revenue funds increase of \$10,000. This change is due primarily to increases in all funds that support the Emergency Medical Services activity. The gross budget supports 59.0 FTEs, an increase of 3.0 FTE from the FY 2004 approved budget.

Key Result Measures

Program 2: Emergency Health and Medical Services

Citywide Strategic Priority Area(s):

Strengthening Children, Youth, Families, and Elders

Manager(s): Thomas Calhoun, Medical Officer, M.D., Senior Deputy Director for Medical Affairs

Supervisor(s): Vacant

Measure 2.1: Percent of basic life support ambulances that pass inspection

	Fiscal Year		
	2004	2005	2006
Target	80	85	90
Actual	-	-	-

Measure 2.2: Percent of advanced life support ambulances that pass inspection

	Fiscal Year		
	2004	2005	2006
Target	80	85	90
Actual	-	-	-

Measure 2.3: Percent of healthcare providers that are trained in emergency response

	Fiscal Year		
	2004	2005	2006
Target	60	75	80
Actual	-	-	-

Measure 2.4: Percent of institutions with updated bio-terrorism plans

	Fiscal Year		
	2004	2005	2006
Target	80	90	90
Actual	-	-	-

HIV/AIDS

	FY 2004	FY 2005
Budget	\$72,828,824	\$82,212,903
FTEs	155.0	146.0

Program Description

The HIV/AIDS program primarily supports the Citywide Strategic Priority area of Strengthening Children, Youth, Families and Individuals. It functions to provide a comprehensive system of HIV/AIDS prevention and care services to District residents eligible area residents so they can minimize their chance of infection and live

healthier lives. The HIV prevention and care services are provided through the following activities:

- **HIV/AIDS Support Services** - provides administrative, operational and financial support services to the District's Department of Health, HIV/AIDS Administration employees programs so they can be assured that funds are available and contractor payments are timely for HIV/AIDS programs.
- **HIV Health Support Services** - provides capacity building services to District and Washington Eligible Metropolitan Area community service providers so they can expand access to treatment and support services for those impacted by HIV/AIDS.
- **HIV/AIDS Data and Research** - provides HIV/AIDS data and analytical information, reports and studies to the District's Department of Health and community stakeholders so they can have timely access to current HIV/AIDS data.
- **HIV Prevention and Intervention Services** - provides HIV counseling and testing, education, information, referrals and intervention services to District residents so they can prevent new HIV infections and re-infection.
- **HIV AIDS Drug Assistance Program (ADAP)**: This provides HIV/AIDS related medication to District eligible residents who are HIV positive or have AIDS so they can have access to life sustaining medication.
- **HIV Grants and Contracts Management**: This provides sub grants and contracts oversight and monitoring services to the Department of Health's HIV/AIDS Administration and service providers so they can ensure the proper utilization of resources for the delivery of HIV/AIDS services to District residents and the Washington eligible Metropolitan Area.

Program Budget Summary

This program has a gross funds budget increase of \$9,384,079, or 12.9 percent over the FY 2004 approved budget of \$72,828,824. This includes a Local funds increase of \$42,523, a Federal Grant funds increase of \$9,076,657 and Special

Purpose Revenue funds increase of \$264,899. This change is due primarily to increases in Federal Grants to support the Grants and Contracts Management activity. The gross budget supports 146.0 FTEs, a decrease of 9.0 FTEs from the FY 2004 approved budget.

Key Result Measures

Program 3: HIV/AIDS Administration

Citywide Strategic Priority Area(s):

Strengthening Children, Youth, Families, and Elders

Manager(s): Ivan Torres, Interim Senior Deputy Director.

Supervisor(s): Vacant

Measure 3.1: Percent increase in the number HIV positive individuals identified through counseling and testing

	Fiscal Year		
	2004	2005	2006
Target	2.5	2.5	2.5
Actual	-	-	-

Measure 3.2: Percent of awarded funds expended

	Fiscal Year		
	2004	2005	2006
Target	98	98	98
Actual	-	-	-

Measure 3.3: Percent increase in the number of existing providers who have expanded their HIV/AIDS treatment and support services

	Fiscal Year		
	2004	2005	2006
Target	25	25	25
Actual	-	-	-

Measure 3.4: Percent decrease in the number of newly diagnosed AIDS cases

	Fiscal Year		
	2004	2005	2006
Target	10	10	10
Actual	-	-	-

Note: The latest AIDS surveillance data indicated that in 2002, there were 943 new AIDS cases reported.

Environmental Health Science and Regulation

	FY 2004	FY 2005
Budget	\$32,091,819	\$34,389,781
FTEs	421.0	394.0

Program Description

The **Environmental Health Science and Regulation** program primarily supports the Citywide Strategic Priority area of Making Government Work as it functions to provide oversight and policy guidance, planning and support services to its programs to ensure effective implementation of health regulations in the District of Columbia.

These services are provided through the following activities:

- **Enforcement, Compliance and Environmental Justice** - provides enforcement support to environmental health programs, coordinates enforcement and compliance approaches, strategies and efforts, coordinates environmental Health Administration's environmental justice program so that the environmental health programs can effectively enforce and comply with mandates under federal and local laws and regulations and policies, and citizens' concern regarding environmental justice are addressed.
- **Policy, Planning, and Program Evaluation** - provides public health policy guidance, program monitoring and evaluation, and program planning services to Environmental Health Science and Regulation Program managers so they can shape goals and objectives for environmental health regulation in the District of Columbia.
- **Food Drug and Radiation** - provides inspections, compliance and education outreach services to providers of health care givers, food handlers and operators of x-ray equipment so they can render effective medical care, effective radiographic services and provide wholesome food produce to the public.
- **Hazardous Materials and Toxic Substances** - provides source reduction and environmental enhancement services to District residents and visitors so they can minimize disease and dysfunctions from environmental exposures.
- **Environmental Quality** - provides monitoring, inspections, enforcement, compliance and education outreach services to the regulated community so that District of Columbia residents and visitors can enjoy clean air, safe water and an abundance of fish and wildlife.

- **Rodent Control (Community Hygiene)** - provides animal disease prevention, animal control and code enforcement services to the residents and visitors of the District of Columbia so they can be protected from diseases transmitted from animals.
- **Health Regulation Administration** - provides monitoring, inspection, complaint investigation and technical assistance services to District health and childcare facilities to ensure that they are in compliance with District and Federal Laws and Regulation.
- **Health Professional Licensing** - issues licenses to qualified applicants so they can provide quality healthcare to District residents and visitors.
- **Public Health Laboratory** - provides disease and medical condition detection services to District residents and healthcare providers so they can have timely and accurate health status information.

Program Budget Summary

This program has a gross funds budget increase of \$2,297,962, or 7.2 percent over the FY 2004 approved budget of \$32,091,819. This includes a Local funds increase of \$669,905; a Federal Grant funds increase of \$747,530, a Special Purpose Revenue funds increase of \$865,737 and an Intra-District funds increase of \$14,790. The change in Local funds is due to a net decrease of \$1,193,500 in personal services, offset by a net increase in nonpersonal services of \$1,863,405 that includes an increase of \$714,000 for the animal control contract. The gross budget supports 394.0 FTEs, a decrease of 27.0 FTEs from the FY 2004 approved budget.

Key Result Measures

Program 4: Environmental Health Science and Regulation

Citywide Strategic Priority Area(s):
Strengthening Children, Youth, Families, and Elders

Manager(s): Theodore J. Gordon

Supervisor(s): Vacant

Measure 4.1: Percent of storm water permit applications reviewed

	Fiscal Year		
	2004	2005	2006
Target	100	100	100
Actual	-	-	-

Measure 4.2: Percent of underground storage tanks (USTs) registered

	Fiscal Year		
	2004	2005	2006
Target	100	100	100
Actual	-	-	-

Measure 4.3: Percent of inspections completed for hazardous waste facilities

	Fiscal Year		
	2004	2005	2006
Target	100	100	100
Actual	-	-	-

Measure 4.4: Percent of screenings conducted for high blood lead levels among children between the ages of six months and six years

	Fiscal Year		
	2004	2005	2006
Target	100	100	100
Actual	-	-	-

Measure 4.5: Percent of premises abated for rodent control activity

	Fiscal Year		
	2004	2005	2006
Target	30	30	30
Actual	-	-	-

Measure 4.6: Percent of health care facilities inspected

	Fiscal Year		
	2004	2005	2006
Target	75	75	75
Actual	-	-	-

Measure 4.7: Percent of complaints received by the Health Regulation Administration that are completed

	Fiscal Year		
	2004	2005	2006
Target	65	65	65
Actual	-	-	-

Measure 4.8: Percent of applications processed for professional licenses

	Fiscal Year		
	2004	2005	2006
Target	92	92	92
Actual	-	-	-

Measure 4.9: Percent of nurse license renewals processed

	Fiscal Year		
	2004	2005	2006
Target	100	100	100
Actual	-	-	-

Medical Affairs

	FY 2004	FY 2005
Budget	\$14,261,847	\$15,030,693
FTEs	142.0	190.0

Program Description

The **Medical Affairs** program primarily supports the Citywide Strategic Priority area of Strengthening Children, Youth, Families and Elders. It functions to provide community based forums and grants, expert medical advice, health assessment reports, and disease investigations and disease control services to District residents, workers and visitors so they can improve their health status.

These services are provided through the following activities:

- **Communicable Disease:** - provides medical expertise, testing, educational and investigation activities related to infectious diseases to District residents and healthcare providers so they can become active partners in the prevention and control of infectious and vaccine preventable diseases.
- **Chronic Disease:** - provides medical expertise, health education, assessments, counseling and referral services to District residents so they can live longer lives free of disease-causing limitations and complications.
- **Epidemiology and Health Risk Assessment** -provides health risk assessment services to program managers, healthcare providers, and District residents so steps can be taken to reduce or arrest mortality and morbidity.
- **Preventive Health Services** - provides disease specific health programs and policies, medical oversight, and community based services to residents, visitors and workers of the District of Columbia so they can improve their health status.

- **Primary Care** - provides assessments and recommendations for ensuring equal access to health services to residents of the District of Columbia, particularly the uninsured and underinsured, so they can receive health care required to reduce health disparities.

Program Budget Summary

This program has a gross funds budget increase of \$768,846, or 5.4 percent over the FY 2004 approved budget of \$14,261,847. This includes a Local funds increase of \$290,152, a Federal Grant funds increase of \$928,353, a Private Grant funds increase of \$74,996 and a Special Purpose Revenue funds decrease of \$524,655. This change is due primarily to increases of \$512,333 in Local funds to support the Preventive Health Services activity and \$907,806 in Federal Grant funds to support the Communicable Disease activity. The gross budget supports 190.0 FTEs, a increase of 48.0 FTEs over the FY 2004 approved budget.

Key Result Measures

Program 5: Medical Affairs

Citywide Strategic Priority Area(s):
Strengthening Children, Youth, Families, and Elders

Manager(s): Dr. Karen Berry, Interim Senior
Deputy Director for Medical Affairs

Supervisor(s): Vacant

Measure 5.1: Percent of providers placed in health professional shortage areas (HPSA) electing to remain after their commitment period

	Fiscal Year		
	2004	2005	2006
Target	33	35	37
Actual	-	-	-

Measure 5.2: Percent of children at risk for developmental delays referred to appropriate services

	Fiscal Year		
	2004	2005	2006
Target	10	10	15
Actual	-	-	-

Measure 5.3: Percent of reported critical outbreak cases investigated within 48 hours

	Fiscal Year		
	2004	2005	2006
Target	95	95	96
Actual	-	-	-

Measure 5.4: Percent of emergency department (ED) visits for poisonings (nonbio-terrorism) among children five and under that receive technical consultations

	Fiscal Year		
	2004	2005	2006
Target	95	97	97
Actual	-	-	-

Measure 5.5: Percent of children at risk for developmental delays who receive a nurse home visit

	Fiscal Year		
	2004	2005	2006
Target	33	34	38
Actual	-	-	-

Measure 5.6: Percent of screened persons referred for chronic disease conditions

	Fiscal Year		
	2004	2005	2006
Target	22	33	34
Actual	-	-	-

Measure 5.7: Percent of case-managed clients with abnormal screening results that receive timely and appropriate case management services

	Fiscal Year		
	2004	2005	2006
Target	40	50	55
Actual	-	-	-

Medical Assistance Administration

	FY 2004	FY 2005
Budget	\$1,205,886,215	\$1,346,740,801
FTEs	125.0	143.0

Program Description

The Medical Assistance Administration (MAA) primarily supports the Citywide Strategic Priority area of Making Government work. It functions to develop, finance and implement a comprehensive plan for an accessible, efficient and high quality cost-effective health care service delivery system that meets the health needs of uninsured and under-insured residents of the District of Columbia ("District"); to develop policy and provide fiscal and management oversight of the State Medicaid Program, State Children's Health Insurance Program (SCHIP), the Immigrant Children Program, the Medical charities Program, and other programs designed to expand access to care; and to advance excellence in health promotion, disease management, and quality of life for uninsured and under-insured

residents of the District of Columbia. The following activities highlight the various services provided by the Medical Assistance Administration:

- **Health Services Management** - provides policy and finance and audit support services to the Medical Assistance Administration so they can administer medical assistance programs and operations. To effectively operate this program, Health Services Management began implementation of the data warehouse project so that crucial statistical and financial information can be accessed timely.
- **Program Integrity** - provides investigation and audit services to the Medical Assistance Administration so they can ensure that health care services and program dollars are appropriately and effectively utilized. The office primary mission is to conduct claim and program reviews to identify areas of error, incorrect payments, possible waste, fraud and abuse in the Medicaid Program. In addition, the office is also responsible for identifying third party coverage that will offset Medicaid's payment, collecting payments made after Medicaid has paid and assuring that future claims are billed to the primary.
- **Quality Management** - provides quality improvement services to all Medical Assistance Administration (MAA) components and activities so they can improve the quality and value of the health care and services provided to communities and individuals served by MAA. To effectively operate this program, Quality Management introduced a structured and systematic mechanism within MAA with the authority and responsibility to manage an outcome-based performance improvement program.
- **Children and Families** - provides outreach and enrollment services to Medicaid recipients and providers so they can access services and provide improved quality, cost effective services to recipients. The goal of this program is to provide for the delivery of quality, appropriate and cost effective Medicaid services to both children and childless adult Medicaid beneficiaries who are not otherwise eligible for Medicaid services.

- **Disabilities and Aging** - goal of the Office on Disabilities and Aging (ODA) is to appropriately fund and monitor both long term care and home and community-based services (HCBS) to the adult Medical Assistance enrollees with disabilities, including individuals with physical disabilities, mental retardation or a developmental disability or HIV/AIDS and the aged. ODA seeks to expand quality services and provide enrollees with disabilities and the aged information on care options so they can access services in the least restrictive setting. To effectively operate this multi-faceted set of program responsibilities, ODA has sought to improve and direct MAA services for the aged and disabled through a structured methodology of service review of provider services and support of persons seeking traditional Medicaid fee for service programs under the State Plan or through waiver services. ODA approves services for consumers enrolled in Medicaid fee for service and providers of care for eligible consumers as well as for waiver services. ODA utilizes mechanisms within MAA to respond to, manage and support Medicaid community-based services and seeks to develop more outcome-based performance improvement programs.
- **Program Operations** - provides oversight of claims processing services to enrolled medical assistance providers so they can provide medical assistance services to eligible medical assistance clients. To effectively operate this program, Program Operations works closely with monitors, and supports the Fiscal Agent (ACS) to ensure tasks related to Claims Processing, Electronic Claims Submission, Project Management, Provider Enrollment and Relations, and Application Software Support are conducted according to the terms of the District of Columbia MMIS contract.
- **District of Columbia Public Schools** - facilitates the provision of school based health services through assistance with program modeling, rate setting and State Plan amendment language to ensure that children have

access to all care required in an Individual Education Plan and that the schools are able to obtain reimbursement for those services.

- **Mental Health** - provides programmatic oversight with respect to Medicaid State Plan Amendment and rules development, rate setting and annual cost report audit services so that the Department of Mental Health can claim Medicaid reimbursement accurately and appropriately.
- **Department of Human Services** - provides programmatic oversight with respect to State Plan Amendment and rules development, rate setting and annual cost report audit services so that the Department of Human Services can claim Medicaid reimbursement accurately and appropriately.
- **Child and Family Services Agency (CFSA)**: ensures that children in foster care have access to all preventive and other appropriate services as deemed necessary for their health and well-being. OCF is responsible for monitoring and oversight of utilization and provider recruitment to assure appropriate placement, and payment of Medicaid covered services. Medicaid is responsible for the local share payment when children are placed in Medicaid facilities. To that end, OCF is recruiting CFSA providers into the Medicaid network to facilitate cost effective care.

Program Budget Summary

This program has a gross funds budget increase of \$140,854,686, or 11.7 percent over the FY 2004 approved budget of \$1,205,886,215. This includes a Local funds increase of \$38,488,804, a Medicaid Payments Grant funds increase of \$100,992,149.

The change in Local funds is due to a personal services increase of \$323,939 to reflect the redirection of the Office of Medicaid Operations Reform staff to the Medical Assistance Administration, and a net increase of \$37,227,944 in nonpersonal services for increased costs for the Medicaid program.

A portion of the Federal Medicaid Payments funds includes funds for the public provider agencies. The Child and Family Services

Agency, the Department of Mental Health and D.C. Public Schools provide Medicaid related services as public provider agencies. The following Federal Medicaid funding levels have been certified for these agencies:

Agency	FY 2005 Certified Level
Child and Family Services	\$38,322,531
DC Public Schools	\$22,258,552
Department of Mental Health	\$42,744,844
Total	\$103,326,227

Key Result Measures

Program 6: Medical Assistance Administration

Citywide Strategic Priority Area(s):
Strengthening Children, Youth, Families, and Elders

Manager(s): Robert Maruca, Director

Supervisor(s): Vacant

Measure 6.1: Percent of the highest paid providers by categories of providers for fraud and abuse that are audited

	Fiscal Year		
	2004	2005	2006
Target	15	15	10
Actual	-	-	-

Measure 6.2: Percent of targeted population involved in a disease management program to improve health indicators

	Fiscal Year		
	2004	2005	2006
Target	10	10	10
Actual	-	-	-

Measure 6.3: Percent increase on fee-for-service Health Check participation rate

	Fiscal Year		
	2004	2005	2006
Target	10	5	5
Actual	-	-	-

Measure 6.4: Increase Health Check participation ratios for managed care plans

	Fiscal Year		
	2004	2005	2006
Target	75	75	75
Actual	-	-	-

Measure 6.5: Percent increase in the number of persons enrolled in the home and community based elderly and physical disabilities waiver

	Fiscal Year		
	2004	2005	2006
Target	40	50	50
Actual	-	-	-

Measure 6.6: Percent payment accuracy through the Medicaid Management Information System (MMIS)

	Fiscal Year		
	2004	2005	2006
Target	90	90	90
Actual	-	-	-

Measure 6.7: Percent of DC Public Schools submitted claims that are adjudicated within 45 days of receipt

	Fiscal Year		
	2004	2005	2006
Target	95	95	95
Actual	-	-	-

Measure 6.8: Percent of Department of Mental Health submitted claims that are adjudicated within 45 days of receipt

	Fiscal Year		
	2004	2005	2006
Target	95	95	95
Actual	-	-	-

Measure 6.9: Percent of Child and Family Services Agency submitted claims that are adjudicated within 45 days of receipt

	Fiscal Year		
	2004	2005	2006
Target	95	95	95
Actual	-	-	-

Measure 6.10: Percent of individuals diverted from institutional care to home and community based settings as a result of waiver enrollments (elderly and disabled waiver)

	Fiscal Year		
	2004	2005	2006
Target	5	5	7
Actual	-	-	-

Health Care Safety Net Administration

	FY 2004	FY 2005
Budget	\$81,311,952	\$95,451,525
FTEs	17.0	17.0

Program Description

The Health Care Safety Net Administration ensures that eligible uninsured residents of the

District of Columbia are provided open access to appropriate, quality health care with an emphasis on disease prevention and community-based primary care through an integrated, cost-efficient, and culturally appropriate system. The administration provide services through the following activities:

- **Oversight, Monitoring and Quality Control** - ensures services are provided according to the contractual requirements and approved standards of care.
- **Patient Care, Ancillary and Support Services** - provides funding to ensure that eligible uninsured residents of the District of Columbia are provided open access to condition appropriate, quality health care with an emphasis on disease prevention and community-based primary care through an integrated, cost-efficient, and culturally appropriate.

Program Budget Summary

This program has a gross funds decrease of \$14,139,573, or 17.4 percent over the FY 2004 approved budget of \$81,311,952. This includes a Local funds increase of \$15,480,961, a Special Purpose Revenue funds decrease of \$1,000,000, and Intra-District funds decrease of \$341,388. The change in Local funds is due primarily to a net increase in nonpersonal services of \$15,350,996 to fully fund the contractual obligations of the Health Care Safety Net program. The gross budget supports 17.0 FTEs, no change from the FY 2004 approved budget.

Key Result Measures

Program 7: Health Care Safety Net Administration

Citywide Strategic Priority Area(s):

Strengthening Children, Youth, Families, and Elders

Manager(s): Brenda Emanuel, Deputy Director

Supervisor(s): James A. Buford, Director

Measure 7.1: Percent of invoices reviewed and approved within three days from receipt of a valid invoice

	Fiscal Year		
	2004	2005	2006
Target	100	100	100
Actual	-	-	-

Measure 7.2: Percent of monthly service utilization claims that are reviewed and assured to not exceed approved annual budget

	Fiscal Year		
	2004	2005	2006
Target	100	100	010
Actual	-	-	-

Measure 7.3: Percent of claims and eligibility files audited to assure compliance with adjudication and enrollment requirements

	Fiscal Year		
	2004	2005	2006
Target	10	10	10
Actual	-	-	-

Measure 7.4: Percent of medical chart audits per month that include an overall sample from primary care, inpatient care and emergency department services

	Fiscal Year		
	2004	2005	2006
Target	0.8	0.8	0.8
Actual	-	-	-

Measure 7.5: Percent of all contractual requirements that are reviewed on a monthly basis to ensure contract terms are adhered to

	Fiscal Year		
	2004	2005	2006
Target	80	80	80
Actual	-	-	-

Measure 7.6: Percent of all components of the financial reconciliation process completed (submit complete report by the end of the reporting period)

	Fiscal Year		
	2004	2005	2006
Target	100	100	100
Actual	-	-	-

Health Promotion

	FY 2004	FY 2005
Budget	\$33,175,698	31,267,345
FTEs	209.0	178.0

Program Description

The **Health Promotion** program primarily supports the Citywide Strategic Priority area of Strengthening Children, Youth, Families, and Elders. It functions to provide health assessments, wellness promotion, health education and information, health screenings, health outreach, interventions, and support services to District of Columbia residents and visitors so they can minimize their chances of illness and

live healthier lives. The various services within this program are provided through the following activities:

- **Maternal and Family Health** - provides outreach, assessment, health education, and referral and support services to District women, children and families so they can live healthier lives.
- **Nutrition Programs** - provides health and nutrition assessments, interventions, education, food, and fitness promotion and referral services to District families, infants, children, and seniors so they can have nutritious foods and nutrition information.
- **Health Promotion Support** - provides wellness promotion, health education, and public information, health screenings, health outreach and referrals, and general prevention and support services to District of Columbia residents and visitors so they can be informed about health issues in order to minimize their chances of illness and live healthier lives.
- **School Health** - provides school-based nursing and wellness services to District school students so they can learn about health issues, be screened for childhood diseases, and be immunized and treated or referred for illness.

Program Budget Summary

This program has a gross funds decrease of \$1,908,353, or 5.8 percent from the FY 2004 approved budget of \$33,175,698. This includes a Local funds increase of \$902,202, a Federal Grant funds decrease of \$2,451,223, and Private Grant funds decrease of \$359,332. This change is due primarily to reductions in Federal and Private Grant funds that support the Maternal and Family Health, Nutrition Program, and Health Promotion Support activities. The gross budget supports 178.0 FTEs, a decrease of 31.0 FTEs from the FY 2004 approved budget.

Key Result Measures

Program 8: Health Promotion

Citywide Strategic Priority Area(s):
Strengthening Children, Youth, Families, and Elders

Manager(s): Ronald E. Lewis, M.P.P.

Supervisor(s): Vacant

Measure 8.1: Percent of residents reached with health promotion/disease prevention information

	Fiscal Year		
	2004	2005	2006
Target	85	85	85
Actual	-	-	-

Measure 8.2: Percent of live births where the women entered prenatal care during the first trimester of pregnancy (among women participating in one of the Maternal and Family Health Admin Case Management programs)

	Fiscal Year		
	2004	2005	2006
Target	78	98	98
Actual	-	-	-

Measure 8.3: Percent of students receiving health services through the school nurse program

	Fiscal Year		
	2004	2005	2006
Target	80	80	80
Actual	-	-	-

Measure 8.4: Percent of WIC and CSFP-eligible residents participating in nutrition intervention and education sessions

	Fiscal Year		
	2004	2005	2006
Target	95	95	95
Actual	-	-	-

Measure 8.5: Percent increase in the number of pharmacy requests processed within 72 hours

	Fiscal Year		
	2004	2005	2006
Target	97	97	97
Actual	-	-	-

Measure 8.6: Percent increase in the amount of grant funds from federal and private sources

	Fiscal Year		
	2004	2005	2006
Target	5	5	5
Actual	-	-	-

Policy, Planning and Research

	FY 2004	FY 2005
Budget	\$3,906,887	\$4,615,543
FTEs	50.0	53.0

Program Description

The Policy, Planning and Research program collects and analyzes vital statistics data, collects and analyzes targeted information on health programs and outcomes, performs state health plan-

ning functions, develops policies and strategic plans, implements HIPAA, and provides business process reengineering services to government entities and the public so data recipients can improve the efficiency and effectiveness of health services.

These services are provided through the following activity:

- **State Center for Health Statistics** - provides health statistics and vital records to the Department of Health and the public so they can have appropriate access to local vital records, and health statistical data.

Program Budget Summary

This program has a gross funds increase of \$708,656, or 18.1 percent over the FY 2004 approved budget of \$3,906,887. This includes a Federal Grant funds increase of \$134,136 and Special Purpose Revenue funds increase of \$574,520. This change is due primarily to increases in Federal Grant and Special Purpose Revenue funds that support the State Center for Health Statistics activity. The gross budget supports 53 FTEs, an increase of 3.0 FTEs from the FY 2004 level.

Key Result Measures

Program 9: Policy, Planning and Research

Citywide Strategic Priority Area(s):

Strengthening Children, Youth, Families, and Elders

Manager(s): Carl W. Wilson, Deputy Director for Policy

Supervisor(s): James A. Buford, Director

Measure 9.1: Percent of vital record actions completed

	Fiscal Year		
	2004	2005	2006
Target	100	100	100
Actual	-	-	-

Measure 9.2: Percent of health data requests are filled

	Fiscal Year		
	2004	2005	2006
Target	99	99	99
Actual	-	-	-

Measure 9.3: Percent of health information customers requesting service that are served

	Fiscal Year		
	2004	2005	2006
Target	100	100	100
Actual	-	-	-

Measure 9.4: Percent of Certificate of Need applications processed

	Fiscal Year		
	2004	2005	2006
Target	100	100	100
Actual	-	-	-

Measure 9.5: Percent of State Plan chapter updates completed

	Fiscal Year		
	2004	2005	2006
Target	100	100	100
Actual	-	-	-

Measure 9.6: Percent of strategic information and business systems plans developed

	Fiscal Year		
	2004	2005	2006
Target	75	75	75
Actual	-	-	-

Measure 9.7: Percent of all DOH programs assessed for risk of non-compliance with HIPAA regulations

	Fiscal Year		
	2004	2005	2006
Target	99	99	99
Actual	-	-	-

Measure 9.8: Percent of all DOH staff trained on HIPAA privacy and security requirements (receive privacy standards and policy manual)

	Fiscal Year		
	2004	2005	2006
Target	85	85	85
Actual	-	-	-

Measure 9.9: Percent of all DOH operational policies inventoried and complied

	Fiscal Year		
	2004	2005	2006
Target	75	75	75
Actual	-	-	-

Measure 8.10: Percent of all policy committee meetings convened

	Fiscal Year		
	2004	2005	2006
Target	85	85	85
Actual	-	-	-

Agency Management

	FY 2004	FY 2005
Budget	\$11,656,661	\$7,900,799
FTEs	105.0	47.0

Program Description

The **Agency Management** program provides operational support to the agency so that they have the necessary tools to achieve operational and programmatic results. This program is standard for all Performance-Based Budgeting agencies. More information about the Agency Management program can be found in the Strategic Budgeting chapter.

Program Budget Summary

This program has a gross funds decrease of \$3,755,862, or 32.2 percent from the FY 2004 approved budget of \$11,656,661. This includes a Local funds decrease of \$195,987, a Federal Grant funds decrease of \$3,552,715, and a Special Purpose Revenue funds decrease of \$7,160. Changes in the Local funds and Federal Grants fund are due primarily to the movement of resources to the new Agency Financial Operations program. The budget supports 47.0 FTEs, a decrease of 58.0 FTEs from the FY 2004 approved budget.

Key Result Measures

Program 10: Agency Management

Citywide Strategic Priority Area(s): Making Government Work

Manager(s): Sumita Chaudhuri, CFO

Supervisor(s): Vacant

Measure 10.1: Dollars saved by agency-based labor management partnership project(s)

	Fiscal Year		
	2004	2005	2006
Target	-	-	-
Actual	-	-	-

Measure 10.2: Percent variance of estimate to actual expenditure (over/under)

	Fiscal Year		
	2004	2005	2006
Target	5	5	5
Actual	-	-	-

Measure 10.3: Cost of Risk

	Fiscal Year		
	2004	2005	2006
Target	-	-	-
Actual	-	-	-

Note: This measure replaces "Percent reduction of employee lost work-day injury cases." Cost of Risk will be a comprehensive measure of a wide range of risks confronting each agency, including but not limited to safety issues, financial risks, and potential litigation. Agencies will establish a baseline in FY 2004 (FY 2005 for PBB III agencies) and will seek to achieve reductions in the Cost-of-Risk in subsequent years. Lost workdays due to injuries will be one of many components of the Cost-of-Risk formula (1/9/04).

Measure 10.4: Rating of 4-5 on all four telephone service quality criteria: 1) Courtesy, 2) Knowledge, 3) Etiquette and 4) Overall Impression

	Fiscal Year		
	2004	2005	2006
Target	4	4	4
Actual	-	-	-

Measure 10.5: Percent of Key Result Measures Achieved

	Fiscal Year		
	2004	2005	2006
Target	70	70	70
Actual	-	-	-

Agency Financial Operations

	FY 2004*	FY 2005
Budget	-	\$3,759,214
FTEs	-	45.0

Note: *FY 2004 program funding levels are presented for comparison purposes only. The Agency financial Operations program did not exist for FY 2004 as it is new for PBB agencies in FY 2005.

Program Description

The purpose of the **Agency Financial Operations** program is to provide comprehensive and efficient financial management services to and on behalf of District agencies so that the financial integrity of the District of Columbia is maintained. This program is standard for all Performance-Based Budgeting agencies. More information about the Agency Financial Operations program can be found in the Strategic Budgeting Chapter.

For more detailed information regarding the proposed funding for activities within this agency's programs, please see schedule 30-PBB in the FY 2005 Operating Appendices volume.